

ASIATIC CHOLERA:

ITS

HISTORY & NATURE,

WITH DIRECTIONS FOR ITS

PREVENTION AND CURE.

SECOND EDITION.

GLASGOW:

HARROWER & BROWN, 11, ST. ANDREW'S SQUARE.

1849.

1880
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ASIATIC CHOLERA.

THERE is no subject that excites so much interest in Glasgow as Cholera. In every house it is made the matter of earnest inquiry and remark. There is a general desire for information, not only about the ravages it is making among us, but also about its history, nature, and modes of attack. By many persons it is thought desirable to be altogether silent with respect to this fearful disease;—it is their opinion that it is best not to mention it in conversation, nor to encourage the reading of papers which contain allusions to it. This course, though suggested by benevolence, is an imprudent one. Even if it were useful to prevent us from thinking of Cholera, it is impossible: for how can we help thinking of it, when our neighbours and friends are dying so suddenly around us? As our thoughts will run upon the subject, it is necessary that we should be accurately informed concerning it; for we shall be prepared to act in a becoming and judicious manner in proportion as we are well informed,—able to comprehend the enemy we have to cope with,—what influences are best adapted to enable us to prevent his assaults, or survive them if they come.

The want of such information as may be had renders families helpless. They cannot aid the exertions of the Medical attendant, nor apply prompt measures in his absence without knowledge.

It is thought that the following details may be of service to the public: it is not pretended that they contain any *certain* remedy either for the *prevention* or for the *cure* of Cholera—there being no knowledge of any *certain* remedy extant as yet. But whilst the most intelligent and temperate may fall victims, it has been proven that Cholera is ever more fatal among those whose circumstances expose them to the inclemency of the weather, and whose knowledge is too limited to

dispose them to use proper precautions in cases of cold and wet; that is, to change their linen and to promote circulation of the blood by means of friction;—than among those who are protected, Firstly,—by means of the comforts which they can command; and, Secondly and chiefly,—by the knowledge which they possess. Indeed on this, as on all subjects, ignorance profiteth nothing. If it be impossible to suggest *certain* remedies, it is both profitable and useful to publish available information at a low cost, since the exercise of caution will lessen the chances of attack, and by promoting general healthfulness, increase the chances of recovery where the precautionary measures have not been successful.

Before entering on the nature of the Disease, known by the name of “Asiatic Cholera,” we will say something of its history.

HISTORY OF CHOLERA.

Asiatic Cholera is of Indian origin. The accounts concerning it are very obscure, so that one cannot say in what age it first prevailed. There is much reason to believe that it appeared at Madras, in the eighteenth century. It made a fearful eruption at Bengal in 1817, and spread subsequently over the greater part of India. The course of the disease was very remarkable. From Bengal it proceeded east and west; the western current reached Calcutta, devastated that city to a great extent—producing the utmost fear among its inhabitants,—then advanced about 400 miles along the Ganges. From thence it proceeded southward in three streams, spreading terror in its march, and making each inhabited spot the scene of its destructive power. Not until three years after its first appearance at Bengal did the Cholera approach the extreme west of India, but in July, 1821, it appeared in Persia, and from thence advanced to Syria, taking about two years in its march. A stream from Persia also advanced northward, reaching a port on the Black Sea, where it began to subside, as did also, at the same time, the stream which visited Syria. The eastern stream from Bengal was more destructive than the western stream, for it reached the thickly inhabited empire of China, as also the Philippine Islands, and was afflictive to the people all the more by reason of their superstitions and general barbarism.

from being regarded as one ; but too much care and attention is better than none, provided that the stomach be not tampered with. The unmistakeable symptom is Diarrhœa, accompanied with irritation of the bowels, though not always observed to precede Cholera, the cases have been sufficiently numerous to warrant medical men in regarding it as an indication which should in no case be neglected.

PREVENTION.

To speak of preventing Cholera, as before hinted, is to speak only in a limited sense; the best precautions may be fruitless in some cases, but they may succeed in numerous others; and it is the part of wisdom to do the utmost that prudence and knowledge can suggest. It is probable that many persons will hurt themselves through fear—that many persons require to be told what they should not do, as well as to be told what they should do.

FEAR.

They should not yield, in the first place, to fear: it is a bad condition of mind to be in, and it leads to many other things that are bad. If they feel depressed, let them try to engage in cheerful conversation, and get such friends as have more fortitude than themselves to be with them as much as possible. Above all, they should guard themselves from unnecessary alarm, and refrain from attempting to cure fancied ills by resorting to spirituous liquors, or to drugs without medical advice and direction. They should take care and not weaken the tone of the stomach, and derange the bowels by swallowing articles which are unnecessary. They should not lessen the chances of Brandy and Laudanum being useful to them under an attack of Cholera, by using these articles when nothing is wrong with them, which a little courage and trust would not cure. They should not, in short, attempt to cure themselves half-a-dozen times a-day, but go to the doctor and state their case to him, and be prescribed for.

WET OR DAMP CLOTHES.

A second and a very important means of prevention is that which relates to dress, exposure, &c. The working classes need

a word on this head; for they do not seem to be aware of the extent to which they imperil themselves by standing about with wet clothes on. Their circumstances give them a claim to sympathy: they cannot command either time, or change of dress when they think necessary; but the most of them can provide for themselves better than they do; and even in extreme cases of destitution there is a great difference between their standing still and walking or working, when they are wet. If wet cannot be avoided, it is always prudent to keep the blood in active circulation, and to change the wet garments directly home is entered; for cold is the leader on of many diseases, and it gives strength to all.

NIGHT AIR.

Nothing has been published as yet concerning the danger of unnecessary exposure to the Night Air during the prevalence of Cholera; but the number of persons who are attacked in the night would seem to indicate that the air is then more dangerous than during the day; therefore if business does not call from home, it is advisable to refrain from going abroad in the evening. As however this recommendation is of a nature which only few can observe, those who go out should take every precaution in protecting their bodies from the damp, and in avoiding profuse heat and cold,—the first, a consequence of great haste in walking, and the second, a consequence of standing still when the body has become heated.

DIET.

Indigestible food must be avoided;—such as pork, veal, new bread, highly seasoned soups, and rich confectionary of every description, as also useless liquids. Weak tea and coffee taken in considerable quantities always produce disorder in the stomach, and bring on the cholera: they should therefore be taken only to allay thirst, and not in profusion, at a time when the utmost care is necessary to preserve the health. Good solid food; *i. e.* beef, full-grown mutton, (each well dressed) bread, sound potatoes, and oaten cake may be taken with great safety; each will contribute to give a healthy tone to the stomach, and if taken regularly and temperately, will afford a great protec-

tion against atmospheric influences. In connection with food, it may be proper to observe, that persons who are about to expose themselves to the night air, would find the eating of a biscuit or a piece of bread as serviceable as the wearing of a top-coat,—one is as indispensable as the other. Surgeons of Hospitals who have for many years attended Fever patients, acknowledge that their mode of protecting themselves against infection, is simply that of taking a biscuit before they enter the sick-wards.

Before going out, let the stomach be supplied with a small quantity of plain digestible food; be careful in avoiding slops and indigestible solids, and wear a flannel belt about nine inches wide round the belly; then the best precautions will have been attended to. Against intemperance, a word ought not to be required, for the common sense of men should instruct them on this head, but as common sense is so frequently outraged in the practise, let it be known that intemperance of every sort—in food—whether as respects quantity or quality—in liquors, or in drugs, occasions a waste of time, and means. If it be the object to commit suicide, “Prussic Acid” is a shorter and less expensive mode, though not more certain.

As the foregoing precautions may not succeed in every case in preventing the approach of Cholera, certain indispensable articles will have to be procured. That the disease may be treated vigorously and judiciously as soon as it appears, no house should be without the following:—Laudanum, Compound Essence of Peppermint, an Injection Bladder, a supply of Mustard, and Arrow Root.

CURE.

Having made the above preparations, let it be assumed that Cholera has appeared in a family, and has to be struggled with; as the disease increases in power every moment, no time should be lost in attending to the following directions:—See that the room is warm in which the patient lies; if the symptoms are irritation of the bowels and slight purging, then 40 drops of Laudanum should be given; but if the symptoms are more severe, as for instance, extreme coldness and spasms of the Stomach, apply a Mustard Plaster at the pit of the Stomach, bound round rather tightly with double Flannel, and if vomiting has not commenced, give a dose of Laudanum and Essence of Peppermint, about 60 drops of each. Should vomiting have commenced, recourse must be had to

THE INJECTION CURE.

When Cholera last visited this country, in 1832, Dr. T. THOMSON, of Belfast, published a small pamphlet on the subject, the result of his varied experience both at home and abroad; and having *practically* tested the remedies he recom-

mends, we are fully convinced that they are the most efficacious and rational yet discovered.

The patient should be placed with his head low, in order to favour the flow of blood to the brain. This can do no harm in any stage of the disease, *and is of the first consequence during the later stages, particularly when "collapse" sets in.* It may be effected by simply withdrawing the pillow; and in extreme cases, the head should be placed even lower than the level of the body.

Then, without loss of time, an INJECTION, consisting of two tea-cupsful of thin Arrow-root, with 80 or 100 drops of *Laudanum*, thoroughly mixed, should be administered while hot, by the *anus*. If the patient be losing heat, or collapsed, a glass of *Whisky* should be mixed with the other ingredients of the Injection. It often happens that the bowels do not retain it at first; but the plan should be persevered in so long as life remains. Dr. Thompson relates a case where "the patient appeared to be just expiring at the moment an Injection was administered, [6 o'clock, P.M.,] and at 8 the following morning the pulse could be found slightly fluttering at the wrist, and unequivocal signs of reaction had taken place." This patient recovered; but the injections had to be continued for *five days* afterwards, during which the stomach could bear nothing on it. "The injections were generally administered *every three hours*, gradually diminishing the quantity of whisky and laudanum, and sometimes leaving them out entirely, being guided in this respect by the pulse and other symptoms."

With this mode of treatment, Dr. Thompson was remarkably successful; and we may state that it has been recently tried in this city with the most marked beneficial results. The remedy is a very simple one; all the apparatus required being a common Injection-bag, which can be had from any respectable druggist; and the mode of administering it, every well-informed woman is familiar with. The great point is to *persevere* in giving the injections, until they are *retained* by the bowels; and in severe cases, even when retained, repeated in a modified form at intervals of a few hours, so long as the tendency to vomiting continues. Along with this treatment, friction applied to the benumbed extremities and other parts affected by spasm, is highly beneficial.

In conclusion, it must be observed that promptness is required. The particulars here offered are not designed to supersede medical assistance, but to aid, and to prevent the loss of time. The public will readily understand why this tract is not signed. There are considerations of etiquette which prevent persons from appearing publicly, lest it should be thought that they wish to make a general calamity the means of securing notice and consideration for themselves. The statements herein contained have been written in haste, and if they induce any to act vigorously and wisely for themselves, until professional aid can be obtained, the object of the writer will be gained.